

Volunteer Providers of Emergency Medical Services



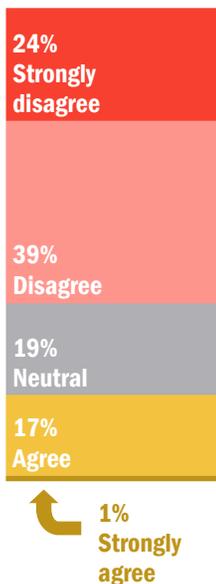
Report highlights

November 2021

Idaho faces EMS funding and staffing challenges that could affect patient care, especially in rural communities.

Just 18% of EMS directors reported that their agency is able to maintain sufficient staff.

EMS agency director agreement with the statement: My agency is able to maintain sufficient staff and volunteers to consistently provide the amount and quality of emergency medical care that our community needs.



- “ We are just getting by and are all volunteers.
- “ We have been under half staffed for more than ten years.
- “ We are just a few retirements away from not having adequate staff.
- “ I agree with the statement, however as the demand gets greater it is taxing our volunteers to the utmost.

Source: Office of Performance Evaluations' survey of EMS agency directors.

Idaho has made little progress on our 2010 recommendations to improve governance of EMS.

Idaho Code does not designate EMS as an essential government service and therefore does not guarantee access for all Idahoans.

EMS is almost universally provided without proof of insurance or ability to pay. Agencies face barriers to recouping their costs, especially in rural Idaho.

EMS relies on a patchwork of funding sources. Most agencies reported inadequate funding for personnel.

Nearly 7 in 10 providers in rural Idaho are volunteers. The number of EMS providers has not kept up with population growth.

Response times and standards of care vary widely across the state.

22% of EMS directors reported that their agency receives sufficient funding to meet the needs of their community.

65% reported that they experienced delayed emergency response times due to staffing issues in the last year.

33% reported that lack of staff availability affected response times at least monthly.

88% reported that recruitment and retention of EMS volunteers in Idaho will only get harder in the future.



Recommendations and policy considerations

The Department of Health and Welfare's Bureau of EMS and Preparedness should improve monitoring and technical assistance for agencies to meet the 24-hour response requirement.

The Legislature could support agency recruitment and retention efforts by providing financial compensation, benefits, and training.

View the report:
www.legislature.idaho.gov/ope/

